## STATE OF ALABAMA HOME BUILDERS LICENSURE BOARD UB INFORMATION FORM

P.O. Box 303605 Montgomery, AL 36130-3605 Phone (800) 304-0853 Facsimile: (334) 263-1397

**HOMEOWNER: BUILDER:** Name: \_\_\_\_\_ Name: \_\_\_\_\_ Address: \_\_\_\_\_ Address: Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_ Email: **Work Site Address:** Directions: What work was builder hired to perform? Date of Contract: Amount of Contract: \$\_\_\_\_\_ Amount paid to builder: \$\_\_\_\_\_ Last day builder was on the job: Please check the documents provided. ( ) Contract ( ) Copies of Liens/Judgments ( ) Written Correspondence with Builder ( ) Deed ( ) Building Permit ( ) Photographs ( ) Front and back copy of cancelled checks ( ) Warranty ( )\_\_\_\_\_ ( ) Blueprints/Plans Briefly state problem with builder and/or work performed by builder: Please print and attach additional sheets if necessary.

Date

Signature